

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000049886

Entity Name: LEOR ALUMINUM, LLC

FILED
Nov 26, 2008
Secretary of State

Current Principal Place of Business:

1255 LAQUINTA DRIVE
SUITE 208
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

1255 LAQUINTA DRIVE
SUITE 208
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 20-4877907 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

AKOOKA, RUBI
1255 LAQUINTA DRIVE
SUITE 208
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

DAVIS, DAVID B
1255 LAQUINTA DRIVE
SUITE 208
ORLANDO, FL 32809 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DAVID B DAVIS

11/26/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: AKOOKA, RUBI
Address: 2686 PINE SHADOW LANE
City-St-Zip: CLERMONT, FL 34711

Title: MGRM () Delete
Name: DAVIS, DAVID B
Address: 5 GHOST PONY ROAD
City-St-Zip: BLUFFTON, SC 29910

Title: MGRM () Delete
Name: SHAW, PETE F
Address: 12 GRAHAM LANE
City-St-Zip: HILTON, SC 29926

Title: MGRM (X) Delete
Name: MCDERMOTT, KEVIN G
Address: 5 FOREST HILL CIRCLE
City-St-Zip: BLUFFTON, SC 29910

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DAVIS, DAVID B
Address: 5 GHOST PONY ROAD
City-St-Zip: BLUFFTON, SC 29910

Title: MGRM (X) Change () Addition
Name: SHAW, PETE F
Address: 12 GRAHAM LANE
City-St-Zip: HILTON, SC 29926

Title: MGRM (X) Change () Addition
Name: MCDERMOTT, KEVIN G
Address: 5 FOREST HILL CIRCLE
City-St-Zip: BLUFFTON, SC 29910

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DAVID B DAVIS

MGR

11/26/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date